Fill in this information to identify your case:	Check one box only as directed in this form and in Form 122A-1Supp:				
Debtor 1 Joshua I Springer	122A-1Supp.				
Debtor 2 (Spouse, if filing)	■ 1. There is no presumption of abuse				
United States Bankruptcy Court for the: Eastern District of Pennsylvania Case number	☐ 2. The calculation to determine if a presumption of all applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).				
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.				
	☐ Check if this is an amended filing				
Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly	√ Income 04/20				
attach a separate sheet to this form. Include the line number to which the additional information case number (if known). If you believe that you are exempted from a presumption of abus qualifying military service, complete and file Statement of Exemption from Presumption of Part 1: Calculate Your Current Monthly Income	se because you do not have primarily consumer debts or because of				
What is your marital and filing status? Check one only.					
Not married. Fill out Column A. lines 2-11.					
☐ Married and your spouse is filing with you. Fill out both Columns A and	B. lines 2-11.				
☐ Married and your spouse is NOT filing with you. You and your spouse					
☐ Living in the same household and are not legally separated. Fill out to					
☐ Living separately or are legally separated. Fill out Column A, lines 2-1 penalty of perjury that you and your spouse are legally separated under living apart for reasons that do not include evading the Means Test requi	nonbankruptcy law that applies or that you and your spouse are				
Fill in the average monthly income that you received from all sources, derived during 101(10A). For example, if you are filing on September 15, the 6-month period would be Marc the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do	ch 1 through August 31. If the amount of your monthly income varied during				

spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).

4,200.00

Column A

Debtor 1

Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.

0.00

Column B

Debtor 2 or non-filing spouse

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.

0.00

5. Net income from operating a business, profession, or farm

Debtor 1 0.00 Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses

0.00 Copy here -> \$ 0.00 Net monthly income from a business, profession, or farm \$

6. Net income from rental and other real property

\$ 0.00 Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses

0.00 Copy here -> \$ 0.00 Net monthly income from rental or other real property 0.00 7. Interest, dividends, and royalties

Debtor 1

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Case number (if known)

11/04/20 12:09PM

			Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation		\$	0.00	\$	•	
l .	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benefit unde	er				
	For you\$	0.00					
	For your spouse \$						
	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as stanot include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that p does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter	ated in the next sentence, do allowance paid by the y, combat-related injury or es. If you received any retired ay only to the extent that it would otherwise be entitled		0.00	\$		
	Income from all other sources not listed above. Spe Do not include any benefits received under the Social Sounder the Federal law relating to the national emergency under the National Emergencies Act (50 U.S.C. 1601 et coronavirus disease 2019 (COVID-19); payments receiv crime, a crime against humanity, or international or dom compensation pension, pay, annuity, or allowance paid Government in connection with a disability, combat-relat death of a member of the uniformed services. If necessal separate page and put the total below.	ecurity Act; payments made y declared by the President seq.) with respect to the yed as a victim of a war estic terrorism; or by the United States ted injury or disability, or					
	·		\$	0.00	\$		
			\$	0.00	\$		
	Total amounts from separate pages, if any.	+	- \$	0.00	\$		
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		4,200.00	+ \$		= \$_	4,200.00
Part	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.					Total incom	current monthly le
	12a. Copy your total current monthly income from line 1	•	Сор	Copy line 11 here=>			4,200.00
Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	form			12b.	\$	50,400.00
13.	Calculate the median family income that applies to y	ou. Follow these steps:					
	Fill in the state in which you live.	PA					
	Fill in the number of people in your household.	1					
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr	online using the link specified	d in the separ	ate instruc	13. tions	\$	57,213.00
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. On Go to Part 3. Do NOT fill out or file Official F	Form 122A-2.					224.2
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	rpage i, check box 2, ine p	resumption o	i abuse is (ueterminea by	rorm 1	ZZA-Z.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information on this s	tatement and	in any atta	chments is tru	ue and c	correct.
	X /s/ Joshua I Springer Joshua I Springer						

Joshua I Springer

Debtor 1

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		9	=	
Debtor 1	Joshua I Springer		Case number (if known)	
	Signature of Debtor 1			
Da	te November 4, 2020 MM / DD / YYYY			
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.		